State: District of Columbia Filing Company: Combined Insurance Company of America

TOI/Sub-TOI: L04G Group Life - Term/L04G.103 Renewable - Single Life - Fixed/Indeterminate Premium

Product Name: Marketing Email

Project Name/Number: /

Filing at a Glance

Company: Combined Insurance Company of America

Product Name: Marketing Email
State: District of Columbia
TOI: L04G Group Life - Term

Sub-TOI: L04G.103 Renewable - Single Life - Fixed/Indeterminate Premium

Filing Type: Form

Date Submitted: 02/07/2020

SERFF Tr Num: VFCP-132253318
SERFF Status: Submitted to State

State Tr Num: State Status: Co Tr Num:

Implementation On Approval

Date Requested:

Author(s): Barbara Mooney, Crystle Peters

Reviewer(s):
Disposition Date:
Disposition Status:
Implementation Date:

State: District of Columbia Filing Company: Combined Insurance Company of America

TOI/Sub-TOI: L04G Group Life - Term/L04G.103 Renewable - Single Life - Fixed/Indeterminate Premium

Product Name: Marketing Email

Project Name/Number: /

General Information

Project Name: Status of Filing in Domicile: Not Filed

Project Number: Date Approved in Domicile: Requested Filing Mode: Domicile Status Comments:

Explanation for Combination/Other: Market Type: Group

Submission Type: New Submission Group Market Size: Small and Large

Group Market Type: Employer, Association, Other Explanation for Other Group Market Type: Union

Overall Rate Impact: Filing Status Changed: 02/07/2020

State Status Changed:

Deemer Date: Created By: Crystle Peters

Submitted By: Crystle Peters Corresponding Filing Tracking Number:

Filing Description:

Please see the attached cover letter.

Company and Contact

Filing Contact Information

17 Church St 603-357-1450 [Phone] 132 [Ext]

Keene, NH 03448 603-357-0250 [FAX]

Filing Company Information

(This filing was made by a third party - selmanandco)

Combined Insurance Company of CoCode: 62146 State of Domicile: Illinois America Group Code: 626 Company Type: Life Administrative Office: Group Name: State ID Number:

17 Church St. FEIN Number: 36-2136262

Keene, NH 03431

(800) 635-4467 ext. 267[Phone]

Filing Fees

Fee Required? No Retaliatory? No

Fee Explanation:

State: District of Columbia Filing Company: Combined Insurance Company of America

TOI/Sub-TOI: L04G Group Life - Term/L04G.103 Renewable - Single Life - Fixed/Indeterminate Premium

Product Name: Marketing Email

Project Name/Number: /

Form Schedule

Lead Form Number:									
Item	Schedule Item	Form	Form	Form	Form	Action Specific	Readability		
No.	Status	Name	Number	Type	Action	Data	Score	Attachments	
1		Marketing Material	CWB- Email1-LBT- 1	ADV	Initial			CWB-Email1-LBT- 1.PDF	
2		Marketing Material	CWB- Email1-LBT- 2	ADV	Initial			CWB-Email1-LBT- 2.pdf	
3		Marketing Material	CWB-Email- 1LBT-3	ADV	Initial			CWB-Email-1LBT- 3.pdf	
4		Marketing Material	CWB- Email1-LBT- 4	ADV	Initial			CWB-Email1-LBT- 4.pdf	

Form Type Legend:

ADV	Advertising	AEF	Application/Enrollment Form
CER	Certificate	CERA	Certificate Amendment, Insert Page, Endorsement or Rider
DDP	Data/Declaration Pages	FND	Funding Agreement (Annuity, Individual and Group)
MTX	Matrix	NAP	Network Access Plan
NOC	Notice of Coverage	ОТН	Other
OUT	Outline of Coverage	PJK	Policy Jacket
POL	Policy/Contract/Fraternal Certificate	POLA	Policy/Contract/Fraternal Certificate: Amendment, Insert Page, Endorsement or Rider
PRC	Provider Contract/Provider Addendum/Provider Leading Agreement	PRD	Provider Directory

Protect what matters most with LifeTime Benefit Term



Benefits designed to help you make the most of your life insurance

Planning for the future can be challenging. LifeTime Benefit Term can help you be prepared for unexpected hardships and make sure your family is protected.

LifeTime Benefit Term provides money to your family at death, and while you are living too. With innovative benefit design, we will work with you to make sure your life insurance plan works for you.

- Guaranteed life premiums
- Guaranteed benefits during working years
- Guaranteed benefits after age 70
- Paid-up benefits
- Terminal Illness benefit

Protect your loved ones with LifeTime Benefit Term

LifeTime Benefit Term Exclusions If the insured commits suicide, while sane or insane, within two years (one year in some states) from the Date of Issue, and while this Coverage is in force, We will pay in one sum to the Beneficiary, the amount of premiums paid for this Coverage.

Long Term Care Exclusions We will not pay Long Term Care benefits for care that is received or loss incurred as a result of: 1) an intentionally self-inflicted injury, or attempted suicide; or 2) war or any act of war, declared or undeclared, or service in the armed forces of any country; or 3) treatment of the Insured's alcohol, drug or other chemical dependence, except if the drug dependency was sustained or acquired at the hands of a Physician, or except while under treatment for an injury or sickness; or the Insured's participation in a riot or insurrection, or the commission of, or attempt to commit, a felony. We will not pay Long Term Care benefits if the Confinement, Home Health Care services, or Adult Day Care service: 1) is received outside the United States and its territories; or 2) is provided by ineligible providers; or 3) is rendered by members of the Certificateholder's or the Insured's Immediate Family.

This document is a brief description of Certificate Form No. C34544 (or applicable state version). Refer to your certificate of insurance for specific details about benefits, exclusions and limitations.

This insurance product is underwritten by Combined Insurance Company of America, Chicago, IL, a Chubb company.

CWB-Email1-LBT-1

Give your family the gift of financial protection with LifeTime Benefit Term



Financial help when your family needs it most

Its difficult to predict the hardships you and your family will face. With LifeTime Benefit Term, we will work with you to customize your life insurance plan to provide the best protection for you and your family. You don't have to make any decisions on how you want to use your benefits until you need them.

- As life insurance: Protects your family with money that can be used in any way they choose.
- For terminal illness: If your coverage has been in force of two years, you can receive 50% of your death benefits, up to \$100,000. Some of the benefits are taken early and the rest are left to your family.
- For long term care: If you become chronically ill, LifeTime Benefit Term will pay you 4% of your death payment each month you receive Long Term Care.

Give yourself greater peace of mind with LifeTime Benefit Term.

LifeTime Benefit Term Exclusions If the insured commits suicide, while sane or insane, within two years (one year in some states) from the Date of Issue, and while this Coverage is in force, We will pay in one sum to the Beneficiary, the amount of premiums paid for this Coverage.

Long Term Care Exclusions We will not pay Long Term Care benefits for care that is received or loss incurred as a result of: 1) an intentionally self-inflicted injury, or attempted suicide; or 2) war or any act of war, declared or undeclared, or service in the armed forces of any country; or 3) treatment of the Insured's alcohol, drug or other chemical dependence, except if the drug dependency was sustained or acquired at the hands of a Physician, or except while under treatment for an injury or sickness; or the Insured's participation in a riot or insurrection, or the commission of, or attempt to commit, a felony. We will not pay Long Term Care benefits if the Confinement, Home Health Care services, or Adult Day Care service: 1) is received outside the United States and its territories; or 2) is provided by ineligible providers; or 3) is rendered by members of the Certificateholder's or the Insured's Immediate Family.

This document is a brief description of Certificate Form No. C34544 (or applicable state version). Refer to your certificate of insurance for specific details about benefits, exclusions and limitations.

This insurance product is underwritten by Combined Insurance Company of America, Chicago, IL, a Chubb company.

CWB-Email1-LBT-2

Open Enrollment July 9-20!



We know you have received a few emails about LifeTime Benefit Term insurance. We want to take a moment to highlight this product and some of its key benefits.

With LifeTime Benefit Term, you can customize your plan to protect you and your family and cover costs during a hardship. This plan can include:

- guaranteed benefits during working years
- guaranteed benefits after age 70
- paid-up benefits
- long term care
- terminal illness benefit

We care about our employees' health and financial well-being, which is why we strive to provide you with the best policies to fit your needs.

This enrollment period consider LifeTime Benefit Term from Chubb to help protect everything you value.

LifeTime Benefit Term Exclusions If the insured commits suicide, while sane or insane, within two years (one year in some states) from the Date of Issue, and while this Coverage is in force, We will pay in one sum to the Beneficiary, the amount of premiums paid for this Coverage.

Long Term Care Exclusions We will not pay Long Term Care benefits for care that is received or loss incurred as a result of: 1) an intentionally self-inflicted injury, or attempted suicide; or 2) war or any act of war, declared or undeclared, or service in the armed forces of any country; or 3) treatment of the Insured's alcohol, drug or other chemical dependence, except if the drug dependency was sustained or acquired at the hands of a Physician, or except while under treatment for an injury or sickness; or the Insured's participation in a riot or insurrection, or the commission of, or attempt to commit, a felony. We will not pay Long Term Care benefits if the Confinement, Home Health Care services, or Adult Day Care service: 1) is received outside the United States and its territories; or 2) is provided by ineligible providers; or 3) is rendered by members of the Certificateholder's or the Insured's Immediate Family.

This document is a brief description of Certificate Form No. C34544 (or applicable state version). Refer to your certificate of insurance for specific details about benefits, exclusions and limitations.

 $This insurance \ product \ is \ underwritten \ by \ Combined \ Insurance \ Company \ of \ America, \ Chicago, \ IL, \ a \ Chubb \ company.$

CWB-Email-1LBT-3

Give your family financial security with LifeTime Benefit Term

Enrollment is quickly approaching



Invest in your family's future

We want to help you protect your family. LifeTime Benefit Term insurance provides money to your family at death, and if needed while you are living too. With customizable benefits, we will work with you to create a life insurance plan that will increase your peace of mind and keeps your family afloat when they need it most.

Protect your loved ones today with LifeTime Benefit Term.

LifeTime Benefit Term Exclusions If the insured commits suicide, while sane or insane, within two years (one year in some states) from the Date of Issue, and while this Coverage is in force, We will pay in one sum to the Beneficiary, the amount of premiums paid for this Coverage.

Long Term Care Exclusions We will not pay Long Term Care benefits for care that is received or loss incurred as a result of: 1) an intentionally self-inflicted injury, or attempted suicide; or 2) war or any act of war, declared or undeclared, or service in the armed forces of any country; or 3) treatment of the Insured's alcohol, drug or other chemical dependence, except if the drug dependency was sustained or acquired at the hands of a Physician, or except while under treatment for an injury or sickness; or the Insured's participation in a riot or insurrection, or the commission of, or attempt to commit, a felony. We will not pay Long Term Care benefits if the Confinement, Home Health Care services, or Adult Day Care service: 1) is received outside the United States and its territories; or 2) is provided by ineligible providers; or 3) is rendered by members of the Certificateholder's or the Insured's Immediate Family.

This document is a brief description of Certificate Form No. C34544 (or applicable state version). Refer to your certificate of insurance for specific details about benefits, exclusions and limitations.

 $This insurance\ product\ is\ underwritten\ by\ Combined\ Insurance\ Company\ of\ America,\ Chicago,\ IL,\ a\ Chubb\ company.$

CWB-Email1-LBT-4

State: District of Columbia Filing Company: Combined Insurance Company of America

TOI/Sub-TOI: L04G Group Life - Term/L04G.103 Renewable - Single Life - Fixed/Indeterminate Premium

Product Name: Marketing Email

Project Name/Number: /

Supporting Document Schedules

Satisfied - Item:	Cover Letter
Comments:	
Attachment(s):	COVER LETTER.pdf
Item Status:	
Status Date:	
Satisfied - Item:	Filing Authorization
Comments:	
Attachment(s):	Filing Authorization 02032020.pdf
Item Status:	
Status Date:	



February 03, 2020

Life & Health Division District of Columbia Department of Insurance 810 1st Street, NE, Suite 701 Washington, DC 20002

RE: Combined Insurance Company of America

NAIC No.: 62146

FEIN Number: 36-2136262

Email - Forms: CWB-Email1-LBT1, CWB-Email1-LBT2, CWB-Email-1LBT3, CWB-Email1-LBT4

Dear Sir or Madam:

The above referenced emails are being submitted for your review and approval. These are new and will not replace any previous filings approved by your Department. This submission contains no unusual or possibly controversial items from the standpoint of normal company or industry standards.

These emails will be available for use by employers to employees to educate them on the Lifetime Benefit Term product prior to enrollment. The only variability within these emails will be the Open Enrollment dates.

Thank you for your assistance with this filing. If you have any questions, please call me at 1-800-635-4467, ext. 132.

Sincerely,

Crystle Peters, Compliance Coordinator Selman & Company

Telephone: 603.357.1450 ext. 132 Email: cpeters@SelmanCo.com



Home Office: 111 East Wacker Drive • Suite 700 • Chicago, Illinois 60601 1-800-544-9382

February 03, 2020

Company NAIC Number: 62146 Company FEIN Number: 36-2136262

Re: Group Life Insurance Policy, Certificate and Benefit Forms

Letter of Authorization

To: All State Insurance Departments

The Combined Insurance Company of America of 111 East Wacker Drive, Suite 700, Chicago, Illinois hereby authorizes Selman & Company, LLC to represent us in the submission of the captioned forms and to negotiate with insurance departments for their approval.

Sincerely,

Michael J. Hollar, Assistant Secretary